

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10 | 559582 | FILING DATE

APPLICATION(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2	1		1			
3	2		1			
4	2		1			
5	2		1			
6	2		1			
7			1			
8			1			
9			1			
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11			1			
12	1		1			
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50						
TOTAL IND.			↓	↓	↓	
TOTAL DEP.		←	11	←	←	
TOTAL CLAIMS		12				

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.			↓	↓	↓	
TOTAL DEP.		←	↓	↓	↓	
TOTAL CLAIMS		12				